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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 6746 000

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101						=	<u>200</u>
Total Claims >20	203/103	<u>7</u>	-20 =	<u>2</u>	X		=	
Independent Claims >3	202/102	<u>7</u>	-3 =	<u>4</u>	X	<u>2</u>	=	<u>300</u>
Mult. Dep Claim Present	204/104						=	
Surcharge	205/105						=	<u>140</u>
English Translation	139						=	

TOTAL FEE CALCULATION

1300

Fees due upon filing the application:

Total Filing Fees Due = \$ 1300

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 1300

Office of Initial Patent Examination

Figure 7

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

09/14/98 CC

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY
TYPE ☐

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	7 minus 20= *	
INDEPENDENT CLAIMS	7 minus 3 = *	4
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEE
	380.00
X\$ 9=	
X39=	
+130=	
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
	760.00
X\$18=	
X78=	312
+260=	
TOTAL	1072

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.